

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC

ADDRESS (number and street)

7000 Cardinal Place

☐ Check if different than previously reported. (ACC)

Dublin

OH

43017

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00332833

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☒ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Nancy Cushman

Signature of Treasurer

Nancy Cushman

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2012</span>		<span style="border: 1px solid black; padding: 2px;">217293.89</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">185980.72</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">23298.61</span>	<span style="border: 1px solid black; padding: 2px;">175028.44</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">209279.33</span>	<span style="border: 1px solid black; padding: 2px;">392322.33</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">23500.00</span>	<span style="border: 1px solid black; padding: 2px;">206543.00</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">185779.33</span>	<span style="border: 1px solid black; padding: 2px;">185779.33</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2012

To:

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

(a) Individuals/Persons Other  
Than Political Committees

(i) Itemized (use Schedule A).....

20590.36

101585.23

(ii) Unitemized .....

2671.78

73140.64

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

23262.14

174725.87

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

23262.14

174725.87

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

36.47

302.57

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

23298.61

175028.44

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

23298.61

175028.44

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	23000.00	152000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	500.00	54543.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	23500.00	206543.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23500.00	206543.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	23262.14	174725.87
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	23262.14	174725.87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	0.00	0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. PAUL R LEODLER**

Mailing Address 7001 SEAVIEW AVE NW  
SUITE 150-17

City State Zip Code  
SEATTLE WA 98117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, PHYSICAL SECURI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY  
07 / 31 / 2012

Transaction ID : PR7800614089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. BONNIE B B BARFIELD**

Mailing Address 1310 DOBSON DRIVE

City State Zip Code  
WAXHAW NC 28173

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY  
07 / 31 / 2012

Transaction ID : PR8737734089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. ROBERT F F GLOVER**

Mailing Address 5633 N KOSTNER AVENUE

City State Zip Code  
CHICAGO IL 60646

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT (HEALTH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

MM / DD / YYYY  
07 / 31 / 2012

Transaction ID : PR8737744089

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

126.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. THOMAS E E HUNT**

Mailing Address 54 BROOKSIDE LN

City  
**LEMONT**

State Zip Code  
**IL 60439**

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
**CARDINAL HEALTH, INC**

Occupation  
**EXEC, ACCOUNT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**375.00**

Date of Receipt

**07 / 31 / 2012**

Transaction ID : **PR8737754089**

Amount of Each Receipt this Period

**50.00**

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. TONY SZADO**

Mailing Address 5342 S LEWISTON CT

City  
**CENTENNIAL**

State Zip Code  
**CO 80015**

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
**CARDINAL HEALTH, INC**

Occupation  
**DIR, ACCOUNT MGMT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**285.00**

Date of Receipt

**07 / 31 / 2012**

Transaction ID : **PR8737764089**

Amount of Each Receipt this Period

**38.00**

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MARK R OVERMAN**

Mailing Address 900 WYNDHAM HILL CT

City  
**SOUTHLAKE**

State Zip Code  
**TX 76092**

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
**CARDINAL HEALTH, INC**

Occupation  
**VP, ACCOUNT (HEALTH**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**285.15**

Date of Receipt

**07 / 31 / 2012**

Transaction ID : **PR8737774089**

Amount of Each Receipt this Period

**38.02**

P/R Deduction (\$19.01 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**126.02**

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. LINDA S LOCKYER**

Mailing Address 1133 NOE STREET

City State Zip Code  
SAN FRANCISCO CA 94114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, ACCOUNT (STRAT A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

**Transaction ID : PR8737784089**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. RONALD A A DEDELS**

Mailing Address 1080 BIG WATER POINT

City State Zip Code  
GREENSBORO GA 30642

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, SALES OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

**Transaction ID : PR8737804089**

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. LOIS A BARRETT**

Mailing Address 2934 CENTRAL ST #3E

City State Zip Code  
EVANSTON IL 60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, SALES OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

532.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

**Transaction ID : PR8737814089**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

212.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. ANTHONY A A HUNT**

Mailing Address 10208 HOLLYBROOK DR

City State Zip Code  
 CHARLOTTE NC 28277

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, ACCOUNT (HEALTH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8737844089

Amount of Each Receipt this Period

16.76

P/R Deduction (\$16.76 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. ADRIANA AYALA**

Mailing Address 11016 SW 77 CT CIR

City State Zip Code  
 PINECREST FL 33156

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, ACCOUNT (STRAT A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8737854089

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MARK T HENDERSON**

Mailing Address 6308 MCCOY

City State Zip Code  
 SHAWNEE KS 66226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.85

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8737874089

Amount of Each Receipt this Period

29.58

P/R Deduction (\$14.79 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

86.34

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. ANTHONY J J CAPRIO**

Mailing Address 6 COTTAGE LANE

City

MARLBORO

State

NJ

Zip Code

07746

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EVP, SALES

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8737934089

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. KATHY S POPEJOY**

Mailing Address 11127 W 59TH AVE

City

ARVADA

State

CO

Zip Code

80004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONS MGMT

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

378.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8737944089

Amount of Each Receipt this Period

50.42

P/R Deduction (\$25.21 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MARYJANE E TEW**

Mailing Address 6315 DUFFY ROAD

City

DELAWARE

State

OH

Zip Code

43015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, CUSTOMER SERVICE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8737954089

Amount of Each Receipt this Period

-38.00

P/R Deduction (\$-38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

212.42

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. FREDERICK D CK D NELSON**

Mailing Address 7303 DEACON COURT

City State Zip Code  
DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT (STRAT A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

**Transaction ID : PR8737964089**

Amount of Each Receipt this Period

81.20

P/R Deduction (\$40.60 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. JAMES L GILL**

Mailing Address 1529 WOODVALE AVENUE

City State Zip Code  
DEERFIELD IL 60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, GM STRATEGIC INI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

**Transaction ID : PR8737984089**

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. CHRISTOPHER J PHER J ANDERSON**

Mailing Address 3600 GEORGE PIERCE

City State Zip Code  
SUWANEE GA 30024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, QRA MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

**Transaction ID : PR8737994089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

149.20

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. LISA A ASHBY**

Mailing Address 9165 TERRAZZA N CRT

City State Zip Code  
DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

PRESIDENT, CATEGORY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

**Transaction ID : PR8738004089**

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. BRAD WILSON**

Mailing Address 30121 FIDDLERS GREEN

City State Zip Code  
FARMINGTON HILLS MI 48334

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, DIRECT SALES MGM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

**Transaction ID : PR8738014089**

Amount of Each Receipt this Period

27.00

P/R Deduction (\$13.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. DOUGLAS J J KATZ**

Mailing Address 20 MCCUE RD

City State Zip Code  
MORGANVILLE NJ 07751

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

**Transaction ID : PR8738024089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

165.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. ELIZABETH R TH R CARNES**

Mailing Address 4830 BROOKSVIEW CIR

City

NEW ALBANY

State

OH

Zip Code

43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8738034089**

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. HARRY T VAIL**

Mailing Address 2693 FOX RIVER LN

City

NAPERVILLE

State

IL

Zip Code

60565

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT MGMT (PR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8738044089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. DAVID B RENDER**

Mailing Address 6909 MARIS CT

City

BURLESON

State

TX

Zip Code

76028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.45

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8738094089**

Amount of Each Receipt this Period

28.06

P/R Deduction (\$14.03 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

166.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. JAMES A WHIDDEN**

Mailing Address 10 CHERRY LANE

City  
CHESTERState Zip Code  
NY 10918FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INCOccupation  
DIR, QRA MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2012

Transaction ID : PR8738104089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. ROBERT M M RANDKLEV**

Mailing Address 4708 MEANDERING WAY

City  
COLLEYVILLEState Zip Code  
TX 76034FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INCOccupation  
SVP/GM, SOUTHWEST RE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2012

Transaction ID : PR8738114089

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. GEOFFREY Y Y Y MCMAHON**

Mailing Address 57-531 KAMEHAMEHA HWY

City  
KAHUKUState Zip Code  
HI 96731FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INCOccupation  
DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2012

Transaction ID : PR8738124089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

116.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. BENJAMIN T N T THOMPSON**

Mailing Address 2029 LEWIS CROSSING COURT

City  
KELLER

State Zip Code  
TX 76248

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, DIRECT SALES MGM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR8738144089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. DONALD R R HOWARD**

Mailing Address 1848 OVERLOOK DRIVE

City  
MOUNT DORA

State Zip Code  
FL 32757

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
EXEC, SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR8738164089

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MICHAEL A A LYNCH**

Mailing Address 550 E ROSEMARY

City  
LAKE FOREST

State Zip Code  
IL 60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
CONSULTING SR EXECUT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2884.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR8738174089

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

490.60

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. LOUIS A MAYLE

Mailing Address 4 WHITTIER RD

City

MARBLEHEAD

State

MA

Zip Code

01945

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP/GM, NORTHEAST RE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8738184089

Amount of Each Receipt this Period

32.00

P/R Deduction (\$16.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. LAUREL BEELER

Mailing Address 1723 EAGLE TRL

City

OXFORD

State

MI

Zip Code

48371

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, SALES TRAINING

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8738204089

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DAVID A GOLDSBERRY

Mailing Address 321 ST ANDREWS LN

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, DIRECT SALES MGM

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8738214089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

158.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. DANIEL L L SWANBERG**

Mailing Address 3648 TIERRA PARIS

City

EL PASO

State

TX

Zip Code

79938

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, ENGINEERING MGM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8738224089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. MICHAEL L L GROESBECK**

Mailing Address 33916 N SUMMERFIELDS DR

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, QRA MEDICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8738234089

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. DEBRA L SCHOTZ**

Mailing Address 2351 THORNWOOD AVENUE

City

WILMETTE

State

IL

Zip Code

60091

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, GM PATIENT CARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8738274089

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

218.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. GREGG A BREWSTER**

Mailing Address 3710 FENCELINE ROAD

City  
FRANKSVILLE

State Zip Code  
WI 53126

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, DIRECT SALES MGM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8738284089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. STEVEN B B MERKIN**

Mailing Address 1481 COUNTRY LN

City  
DEERFIELD

State Zip Code  
IL 60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP, HR BUS PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8738294089**

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MICHELE B B DONATICH**

Mailing Address 520 PENNY LANE

City  
GRAYSLAKE

State Zip Code  
IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, CUSTOMER ADVOCA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8738304089**

Amount of Each Receipt this Period

27.10

P/R Deduction (\$13.55 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

145.10

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. **FRANK E RIDGWAY**

Mailing Address 11513 TOTTENHAM PL

City State Zip Code  
 RICHMOND VA 23233

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8738324089

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. **CINDY ROSER**

Mailing Address 5090 PK BROOKE WKWY

City State Zip Code  
 ALPHARETTA GA 30022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 SVP/GM, SOUTHEAST RE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8738334089

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. **GREG W STORM**

Mailing Address 123 CHALLAIN DRIVE

City State Zip Code  
 LITTLE ROCK AR 72223-5517

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 EXEC, SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8738344089

Amount of Each Receipt this Period

114.12

P/R Deduction (\$19.13 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

254.12

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. **STEPHEN A A INACKER**

Mailing Address 1490 S RIDGE ROAD

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

PRES, MEDICAL CHANNE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

568.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8738354089

Amount of Each Receipt this Period

75.76

P/R Deduction (\$37.88 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. **WILFRIDO M O M SOSA**

Mailing Address 721 LIVE OAK

City

EL PASO

State

TX

Zip Code

79932

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, MANUFACTURING MG

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8738414089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. **SUSAN J JACOBSON**

Mailing Address 1813 NEWTON AVENUE

City

PARK RIDGE

State

IL

Zip Code

60068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, GENERAL COUNSEL

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

532.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8738454089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

189.76

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 21 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. ROBERT B B HOBGOOD**

Mailing Address 203 COBBLESTONE DR

City

CHAPEL HILL

State

NC

Zip Code

27516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT (HEALTH

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8738464089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. EVELYN LONG**

Mailing Address 3333 HAWKS RIDGE DR

City

LAKELAND

State

FL

Zip Code

33810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONS MGMT

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8738484089

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MICHAEL M M SINIGAGLIA**

Mailing Address 57 WILLETS DR

City

SYOSSET

State

NY

Zip Code

11791

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, TERRITORY SALES

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8738504089

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

108.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. KATE C SPIRKO**

Mailing Address 6812 SPRUCE PINE DR

City State Zip Code  
 COLUMBUS OH 43235

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8738514089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. RACHEL R R STOLL**

Mailing Address 420 WAKEFIELD BLUFF COURT

City State Zip Code  
 ALPHARETTA GA 30004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8738534089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. CHARLES L L COBB**

Mailing Address 792 ELDORADO DR.

City State Zip Code  
 SUPERIOR CO 80027

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, ACCOUNT (STRAT A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8738544089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

190.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 OF 115

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. STACY SEPTER**

Mailing Address 18 MILLER DRIVE

City State Zip Code  
 SYLACAUGA AL 35151

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 EXEC, SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : PR8738564089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. JAMES H HORNER**

Mailing Address 2706 ISLAND COVE ROAD

City State Zip Code  
 FORT MILL SC 29708

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 DIR, MANUFACTURING M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : PR8738594089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. PAUL S POGUE**

Mailing Address 1174 GREERS LANDING DR

City State Zip Code  
 HERNANDO MS 38632

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 DIR, MKTG & PRODUCT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : PR8738604089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. BRENDA G G BARDEN**

Mailing Address 3435 ALTA VISTA DR

City  
CHATTANOOGA

State Zip Code  
TN 37411

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8738614089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. DANNY W PENNY**

Mailing Address 27 N LAKE AVE

City  
THIRD LAKE

State Zip Code  
IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, PACKAGING ENGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8738644089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. JAY C GREER**

Mailing Address 1472 MILL RACE

City  
ROCHESTER HILLS

State Zip Code  
MI 48306

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8738654089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 OF 115

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. MARK MISPLAY**

Mailing Address 1811 WINDY HILL LANE

City State Zip Code  
 PROSPER TX 75078

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 DIR, DIRECT SALES MG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : PR8738664089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. CURTIS L L WILENS**

Mailing Address 1347 COVENTRY LN

City State Zip Code  
 NORTHBROOK IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 DIR, MARKETING RESEA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : PR8738684089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. TAYLOR H H SMITH**

Mailing Address 1141 OLD COLONY RD

City State Zip Code  
 LAKE FOREST IL 60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 SVP, GM SURGICAL PRO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : PR8738694089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. **JOHN W SAFFORD**

Mailing Address 2130 W NORTH AVE  
 #302

City State Zip Code  
 CHICAGO IL 60622

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 EXEC, SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8738714089

Amount of Each Receipt this Period

28.00

P/R Deduction (\$14.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. **JOHN E GRISDALE**

Mailing Address 7135 FODOR

City State Zip Code  
 NEW ALBANY OH 43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8738744089

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. **SCOTT A DONNELLY**

Mailing Address 12195 ANDREWS DRIVE

City State Zip Code  
 PLAIN CITY OH 43064

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, MARKETING MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8738754089

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

108.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. **ROBERT MOULTON**

Mailing Address 7017 VIOLET VEIL

City State Zip Code  
 DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, FINANCE (GENERA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8738764089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. **JOSEPH L L BOURQUE**

Mailing Address 18 BUSH HILL RD

City State Zip Code  
 IPSWICH MA 01938

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8738774089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. **STEPHEN REARDON**

Mailing Address 9098 MEDITERRA PLACE

City State Zip Code  
 DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, QRA MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8738784089

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

116.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. PAUL G FARLEY

Mailing Address 52 ONONDEGA RD

City

NARRAGANSETT

State

RI

Zip Code

02882

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8738804089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. EDWARD SULLIVAN

Mailing Address 26 BERNON DRIVE

City

LINCOLN

State

RI

Zip Code

02865

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8738814089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DANIEL BISHOP

Mailing Address 21614 CANYON FOREST CT

City

KATY

State

TX

Zip Code

77450

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, FIN PLNG &amp; ANAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8738824089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

152.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. PATRICK J J ECKHERT**

Mailing Address 4509 HUNTER LAKE DR

City  
POWELL

State Zip Code  
OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, STRATEGIC SOURC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR8738834089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. RENE BLOCH**

Mailing Address 401 SPRING DRIVE

City  
YORKTOWN HEIGHTS

State Zip Code  
NY 10598

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
EXEC TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR8738844089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. ANNLEA C C RUMFOLA**

Mailing Address 8314 DAVINGTON DR

City  
DUBLIN

State Zip Code  
OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, APP DESIGN & DEV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR8738854089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

190.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. JOHN A FIACCO

Mailing Address 124 FOX HAVEN DRIVE

City  
O'FALLON

State Zip Code  
MO 63368

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, PHARM OPS MGMT -

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR8738864089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MICHAEL D D SYNOR

Mailing Address 31772 FAIRWAY DR N

City  
FORISTELL

State Zip Code  
MO 63348

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR8738884089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ERIC D SUTHERLAND

Mailing Address 6433 TULIPWOOD LANE

City  
JAMESVILLE

State Zip Code  
NY 13078

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR8738904089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

152.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. KRISTINA M A M ROBINSON**

Mailing Address 5464 HEATHROW DRIVE

City  
POWELL

State Zip Code  
OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, RESEARCH PROJEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.85

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8738914089**

Amount of Each Receipt this Period

26.78

P/R Deduction (\$13.39 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. ANDRE D SMITH**

Mailing Address 2514 BLUE WATER BAY DR

City  
KATY

State Zip Code  
TX 77494

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, PHARM OPS & ACC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8738934089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. TED L DIBIASE**

Mailing Address 4954 ROSEGATE COURT

City  
DUBLIN

State Zip Code  
OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, ORG HEALTH & LAB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

918.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8738944089**

Amount of Each Receipt this Period

122.40

P/R Deduction (\$61.20 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

187.18

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. SCOTT J VON GLAHN**

Mailing Address 6975 DELMAR BLVD

City State Zip Code  
UNIVERSITY CITY MO 63130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
EXEC, SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR8738954089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. JOSHUA T T GAINES**

Mailing Address 5721 CLOVER LANE

City State Zip Code  
WESTERVILLE OH 43081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP, STRATEGY & CORP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR8738964089

Amount of Each Receipt this Period

58.00

P/R Deduction (\$29.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. STEPHEN FLANNERY**

Mailing Address 275 EAST CENTER ST

City State Zip Code  
SHAVERTOWN PA 18708

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, DIRECT SALES MGM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR8738984089

Amount of Each Receipt this Period

40.06

P/R Deduction (\$20.03 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

136.06

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. CHARLES AQUILINA**

Mailing Address 4871 NORMANDY DRIVE

City State Zip Code  
 GALENA OH 43021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, MKTG &amp; PRODUCT M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8738994089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. GEORGE J J PLAVA**

Mailing Address 3526 PEMBROOKE DR

City State Zip Code  
 RICHMOND TX 77469

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, PHARM OPS &amp; ACCO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1038.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739034089

Amount of Each Receipt this Period

138.46

P/R Deduction (\$69.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. ROBERT S S SUMMERS**

Mailing Address 146 CHASELY CIRCLE

City State Zip Code  
 POWELL OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, MKTG &amp; PRODUCT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739054089

Amount of Each Receipt this Period

60.70

P/R Deduction (\$30.35 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

237.16

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. NATASHA C C NICOL**

Mailing Address 35 RED TAIL HAWK LOOP

City State Zip Code  
PAWLEYS ISLAND SC 29585

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, CLINICAL SPEC -

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8739064089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. SEAN M MCCAFFREY**

Mailing Address 1020 BUCK RUN RD

City State Zip Code  
SOUTHPOINTE PA 15317

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8739074089**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. DEBORAH E E WOLIN**

Mailing Address 44 LAKE MIST DRIVE

City State Zip Code  
SUGAR LAND TX 77479

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, ASC GEN CSL, COM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8739084089**

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

154.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. STEVEN J J CALLISON**

Mailing Address 1368 LINCOLN ROAD

City	State	Zip Code
COLUMBUS	OH	43212

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, APP DESIGN &amp; DEV

Receipt For:

☐ Primary   ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

Transaction ID : PR8739094089

Amount of Each Receipt this Period

36.70

P/R Deduction (\$18.35 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. RONALD M M WADSWORTH**

Mailing Address 4310 SUFFOLK WAY

City	State	Zip Code
EL DORADO HILLS	CA	95762

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, OPERATIONS MGMT

Receipt For:

☐ Primary   ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

Transaction ID : PR8739104089

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. SUSAN C JACKSON**

Mailing Address 260 JENKINS ROAD

City	State	Zip Code
LEBANON	TN	37087

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONS MGMT

Receipt For:

☐ Primary   ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

Transaction ID : PR8739124089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

104.70

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. JOHN O GINN

Mailing Address 10120 TAN RARA DRIVE

City

KNOXVILLE

State

TN

Zip Code

37922

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, INVENTORY MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8739164089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. DEBORAH BROWN

Mailing Address 3204 STONEBRIDGE TR

City

VALRICO

State

FL

Zip Code

33596

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, HEALTH SYSTEM P

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8739174089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. GARY G CACCIATORE

Mailing Address 3810 LOCH GLEN CT

City

HOUSTON

State

TX

Zip Code

77059

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, REGULATORY (ATTY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

542.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8739194089

Amount of Each Receipt this Period

72.32

P/R Deduction (\$36.16 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

148.32

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. RICHARD F F COLLEY**

Mailing Address 2903 21ST AVE CT SE

City  
PUYALLUP

State Zip Code  
WA 98372-1712

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
EXEC, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8739204089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. JAMES L SCOTT**

Mailing Address 9318 PRATOLINA VILLA DRIVE

City  
DUBLIN

State Zip Code  
OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP, NATIONAL MARKET

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8739224089

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. BRADLEY G G COCHRAN**

Mailing Address 2589 AIKIN CIRCLE S

City  
LEWIS CENTER

State Zip Code  
OH 43035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8739244089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

214.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. WILLIAM OWAD

Mailing Address 7558 HEATHERWOOD LN

City State Zip Code  
 DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, OPERATIONAL EXC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1504.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739254089

Amount of Each Receipt this Period

200.60

P/R Deduction (\$100.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER PHER ATZBACH

Mailing Address 524 GARDEN DRIVE

City State Zip Code  
 MARYSVILLE OH 43040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, GENERAL ACCTG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739284089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. LISA A STILLINGS

Mailing Address 5833 WHITECRAIGS CT

City State Zip Code  
 DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, FIN PLNG &amp; ANAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739294089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

276.60

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. JEFFREY B B BRANNON**

Mailing Address 3965 CLEARLAKE CIRCL

City State Zip Code  
 ZANESVILLE OH 43701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

07 / 31 / 2012

**Transaction ID : PR8739304089**

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. CRAIG P COWMAN**

Mailing Address 6851 KILLILEA DRIVE

City State Zip Code  
 DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, PRODUCT MANAGEM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

07 / 31 / 2012

**Transaction ID : PR8739314089**

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. LORI S HAVLOVITZ**

Mailing Address 8969 SUNNINGDALE LANE

City State Zip Code  
 DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, APP DESIGN & DE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

07 / 31 / 2012

**Transaction ID : PR8739324089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

188.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. TRACY K GODFREY**

Mailing Address 3684 BROADLEAF AVE

City  
ELGIN

State  
IL

Zip Code  
60124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, STRATEGIC PRICI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

07 / 31 / 2012

Transaction ID : PR8739334089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. MARK D ZAWADZKI**

Mailing Address 5991 KITCHEN CT

City  
HILLIARD

State  
OH

Zip Code  
43026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, FINANCE (GENERAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 31 / 2012

Transaction ID : PR8739344089

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MARGARET M T M LAVALLE**

Mailing Address 9410 CULROSS CT

City  
DUBLIN

State  
OH

Zip Code  
43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, HR SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

07 / 31 / 2012

Transaction ID : PR8739354089

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

178.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. JOSEPH S S HODGE**

Mailing Address 2260 GNARLED PINE DRIVE

City State Zip Code  
 DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 EXEC, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739364089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. MICHAEL C C KAUFMANN**

Mailing Address 7160 TEMPERANCE POINT ST

City State Zip Code  
 WESTERVILLE OH 43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 CEO, PHARMACEUTICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2884.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739384089

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. GREGORY BOGGS**

Mailing Address 7746 POLO LANE

City State Zip Code  
 POWELL OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, APP DESIGN & DEV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739394089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

460.60

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. ANGELA M M THOMAS**

Mailing Address 9287 WINDY CREEK DR

City State Zip Code  
 COLUMBUS OH 43240

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, INVENTORY MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739404089

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. AMY P SNOW**

Mailing Address 5760 WHITECRAIGS CT

City State Zip Code  
 DUBLIN OH 43017

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EXEC, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739414089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. PETER A STOY**

Mailing Address 1955 ENCLAVE DRIVE

City State Zip Code  
 MT PLEASANT SC 29464

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739424089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

154.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. LAURA L SMITH**

Mailing Address 5828 IVY BRANCH DR

City

DUBLIN

State

OH

Zip Code

43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, SALES OPERATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY  
07 / 31 / 2012

Transaction ID : PR8739464089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. KEVIN M KANNALLY**

Mailing Address 14529 ROBINSON RD

City

PLAIN CITY

State

OH

Zip Code

43064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

MM / DD / YYYY  
07 / 31 / 2012

Transaction ID : PR8739474089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. DANA R THACKER**

Mailing Address 2934 GRIFFIN DR

City

LEWIS CENTER

State

OH

Zip Code

43035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, APP DESIGN & DE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY  
07 / 31 / 2012

Transaction ID : PR8739484089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

152.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. JAMES P COMBS**

Mailing Address 69259 LEE ROAD

City State Zip Code  
 ST CLAIRSVILLE OH 43950

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 EXEC, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

07 / 31 / 2012

**Transaction ID : PR8739494089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. MICHAEL P P KENNEDY**

Mailing Address 4783 VISTA RIDGE DR

City State Zip Code  
 DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 SVP, COMPLIANCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1504.50

Date of Receipt

07 / 31 / 2012

**Transaction ID : PR8739504089**

Amount of Each Receipt this Period

200.60

P/R Deduction (\$100.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. CYNTHIA S S RHOMBERG**

Mailing Address 9379 REDAN COURT

City State Zip Code  
 DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, MARKETING MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

07 / 31 / 2012

**Transaction ID : PR8739534089**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

314.60

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. CAROLYN E E GRANT**

Mailing Address 6869 MEADOW GLEN DR

 City  
 WESTERVILLE

 State  
 OH

 Zip Code  
 43082

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer  
 CARDINAL HEALTH, INC

 Occupation  
 DIR , GOVERNMENT REL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2012

Transaction ID : PR8739544089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. KRISTINA J A J KALLMEYER**

Mailing Address 3940 VILLAGE CLUB DRIVE

 City  
 POWELL

 State  
 OH

 Zip Code  
 43065

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer  
 CARDINAL HEALTH, INC

 Occupation  
 VP, ACCOUNT (HEALTH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2012

Transaction ID : PR8739554089

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. AARON L PITTS**

Mailing Address 5014 CLOSEBURN CT

 City  
 DUBLIN

 State  
 OH

 Zip Code  
 43017

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer  
 CARDINAL HEALTH, INC

 Occupation  
 SVP, STRATEGY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2012

Transaction ID : PR8739574089

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

216.00

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. TROY L HANSON**

Mailing Address 5622 DORSEY DRIVE

City State Zip Code  
COLUMBUS OH 43235

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, MKTG & PRODUCT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8739584089**

Amount of Each Receipt this Period

90.68

P/R Deduction (\$45.34 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. PATRICK A A SELLS**

Mailing Address 4077 PIONEER COURT

City State Zip Code  
POWELL OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, HR BUSINESS PAR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8739614089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. CASSANDRA E RA E BAKER**

Mailing Address 1751 BARRINGTON RD

City State Zip Code  
UPPER ARLINGTON OH 43221

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, GOVT RELATIONS M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

968.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8739644089**

Amount of Each Receipt this Period

129.10

P/R Deduction (\$64.55 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

257.78

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. JAMES M BARKER**

Mailing Address 2761 SKELTON LN

City

BLACKLICK

State

OH

Zip Code

43004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, MANUFACTURING MG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.96

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8739664089**

Amount of Each Receipt this Period

67.30

P/R Deduction (\$33.65 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. JAMES J HOMAN**

Mailing Address 520 EDEN PARK DRIVE

City

FRANKLIN

State

TN

Zip Code

37067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EXEC, SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8739674089**

Amount of Each Receipt this Period

26.64

P/R Deduction (\$13.32 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. STEPHEN T T FALK**

Mailing Address 2175 LANE RD

City

COLUMBUS

State

OH

Zip Code

43220

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EVP & GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8739684089**

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

293.94

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. CAROLE S S WATKINS**

Mailing Address 1967 WOODLANDS PLACE

City  
POWELL

State Zip Code  
OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
CHIEF HUMAN RESOURCE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2884.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8739724089**

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. MARY C SCHERER**

Mailing Address 223 WEATHERBURN CT

City  
POWELL

State Zip Code  
OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, FINANCE (GENERAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8739734089**

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. JON GIACOMIN**

Mailing Address 6792 INGALLS CT

City  
GALENA

State Zip Code  
OH 43021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
EVP, OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8739744089**

Amount of Each Receipt this Period

150.00

P/R Deduction (\$75.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

564.60



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. DALE A HILL

Mailing Address 5931 HERITAGE FARMS DR

City State Zip Code  
 HILLIARD OH 43026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 DIR, PHARM STRAT SOU

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739754089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ANNE F MCCLUSKEY

Mailing Address 10910 E SAN TAN BLVD

City State Zip Code  
 SUN LAKES AZ 85248

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 DIR, CLINICAL OPS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739764089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MICHAEL WOHLFEIL

Mailing Address 1124 CALEDONIA LANE

City State Zip Code  
 CRYSTAL LAKE IL 60014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 DIR, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739774089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

114.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. ROBERT GIACALONE**

Mailing Address 7471 BALFOURE CIRCLE

City State Zip Code  
 DUBLIN OH 43017

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, REG AFFAIRS/CHF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739784089

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. PAMELA S S HOLOHAN**

Mailing Address 405 E WASHINGTON ST

City State Zip Code  
 GARDNER IL 60424

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EXEC, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739794089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. DEBRA A FLUNO**

Mailing Address 622 SUNNYSIDE AVE

City State Zip Code  
 GURNEE IL 60031

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, PHARM OPS &amp; ACC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739804089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

176.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL D D BROWN**

Mailing Address 3103 SADDLE RIDGE

City

RICHMOND

State

TX

Zip Code

77406

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, PHARM OPS & ACCO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8739824089**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. JACQUELINE A INE A GLEASON**

Mailing Address N 7896 VALLEY VIEW RD

City

NEW GLARUS

State

WI

Zip Code

53574

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8739874089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. ANTHONY D D WOO**

Mailing Address 6151 HADDO WAY

City

DUBLIN

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, CORP DEVEL, FIN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8739884089**

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

154.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. TERESA M M JANZ

Mailing Address 2431 N. 84TH STREET

City State Zip Code  
 WAUWATOSA WI 53226

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739894089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. KATHRYN J J ABLEIDINGER

Mailing Address 34 ASHBURY CT

City State Zip Code  
 HUDSON WI 54016

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739904089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DANIEL R R ROBINSON

Mailing Address 8124 CROOKED OAKS CT

City State Zip Code  
 GAINESVILLE VA 20155

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, PHARMACY OPERATI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739914089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

190.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. STEVE M LAWRENCE**

Mailing Address 4868 CARRIGAN RIDGE

City State Zip Code  
 DUBLIN OH 43017

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, RETAIL INDEPEND

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739924089

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. GORDON A A CRAWFORD**

Mailing Address 8735 RICHARDS RD.

City State Zip Code  
 UTICA OH 43080

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, IT PROG/PROJ MG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739934089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. DAVID LAWRENCE**

Mailing Address 326 VINWOOD LANE

City State Zip Code  
 POWELL OH 43065

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, STRATEGIC PLNG/E

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8739944089

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

338.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. MARK E ROSENBAUM**

Mailing Address 632 CHEOWA CIRCLE

City

KNOXVILLE

State

TN

Zip Code

37919

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

CHIEF CUSTOMER OFFIC

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

2884.50

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2012

Transaction ID : PR8739954089

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. STUART MARTIN**

Mailing Address 9711 CONCORD RIDGE

City

BRENTWOOD

State

TN

Zip Code

37027

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONS MGMT

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2012

Transaction ID : PR8739974089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. LAWRENCE E MALHAM**

Mailing Address 206 LONE OAK DRIVE

City

WHITE HOUSE

State

TN

Zip Code

37188

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, TERRITORY SALES

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2012

Transaction ID : PR8739984089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

460.60

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN E HOWARD**

Mailing Address 30 CULLEN DR

City

MOBILE

State

AL

Zip Code

36606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SR CNSLT, FRANCHISE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8740014089**

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. THEOTIS WILSON**

Mailing Address 14607 VILLALONGA LN

City

CHARLOTTE

State

NC

Zip Code

28277

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT (HEALTH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8740024089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. DAVID E GAJESKI**

Mailing Address 352 DORADO BEACH EAST

City

DORADO

State

PR

Zip Code

00646

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, SALES OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8740034089**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

144.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL E E COOPER**

Mailing Address 1539 HIGHWAY 135

City  
RAYVILLE

State Zip Code  
LA 71269

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, CLINICAL SPEC -

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8740074089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. KENDELL F F SHERRER**

Mailing Address 500 SOUTH PARKVIEW AVENUE  
SUITE 305

City  
BEXLEY

State Zip Code  
OH 43209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, BENEFITS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.65

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8740084089

Amount of Each Receipt this Period

40.22

P/R Deduction (\$20.11 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. GARY B ELLIS**

Mailing Address 6146 BALMORAL DRIVE

City  
DUBLIN

State Zip Code  
OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP/GM, MIDWEST REGI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8740094089

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

118.22



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. ERIC M NORMAN**

Mailing Address 7170 KINGSCOTE CT.

City	State	Zip Code
DUBLIN	OH	43017

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

Transaction ID : PR8740104089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. LEEANN EVENSEN**

Mailing Address 1423 SHADY VALLEY

City	State	Zip Code
SUGAR LAND	TX	77479

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SR CNSLT, BUS SYS AN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

Transaction ID : PR8740114089

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. THERESA L L GOULD**

Mailing Address 3418 BIG HICKORY DR.

City	State	Zip Code
KINGWOOD	TX	77345

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, HR BUSINESS PART

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

Transaction ID : PR8740134089

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

118.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. TINA M STAVINOHA

Mailing Address 125 ARROW ROAD

City

EAGLE LAKE

State

TX

Zip Code

77434

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, LEARNING MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8740144089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CONNIE WOODBURN

Mailing Address 9761 ERIN WOODS DR

City

DUBLIN

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, PROF &amp; GOVT REL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2025.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8740154089

Amount of Each Receipt this Period

270.00

P/R Deduction (\$135.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ROBBIE D D JORGENSEN

Mailing Address 578 MORTS DRIVE

City

WENTZVILLE

State

MO

Zip Code

63385

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8740164089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

384.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. BRIAN WORTH**

Mailing Address 5654 ROTHESAY DRIVE

City State Zip Code  
DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, HR BUSINESS PAR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8740194089**

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. DAVID S OLSON**

Mailing Address 12211 CLEARFORK DR

City State Zip Code  
HOUSTON TX 77077

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, PHARMACY OPERAT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8740234089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. ERIC C CHRISTENSEN**

Mailing Address 2481 SUTTER PARKWAY

City State Zip Code  
DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ASC GEN CSL, COM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8740244089**

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

138.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. RAYMOND GROTZINGER**

Mailing Address 0836 SW CURRY ST # 102

City  
PORTLAND

State Zip Code  
OR 97239

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, MULTI-FUNCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY  
07 / 31 / 2012

**Transaction ID : PR8740274089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. ROBERT G G MURPHY**

Mailing Address 10201 SYLVIAN DR

City  
DUBLIN

State Zip Code  
OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, DIRECT SALES MGM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY  
07 / 31 / 2012

**Transaction ID : PR8740284089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. DAVID M ELLIS**

Mailing Address 4801 THOR WAY

City  
CARMICHAEL

State Zip Code  
CA 95608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

MM / DD / YYYY  
07 / 31 / 2012

**Transaction ID : PR8740294089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. RICHARD J J ROSENFELD**

Mailing Address 4827 ROCKWOOD DRIVE

City  
WAXHAW

State Zip Code  
NC 28173

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, PHARM OPS & ACC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

07 / 31 / 2012

Transaction ID : PR8740304089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. BLAIR R WILLIAMS**

Mailing Address 663 LYNNFIELD DR

City  
WESTERVILLE

State Zip Code  
OH 43081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, HR MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

07 / 31 / 2012

Transaction ID : PR8740314089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. ANDREW R R KELLER**

Mailing Address PO BOX 3732

City  
DUBLIN

State Zip Code  
OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, INVENTORY MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

07 / 31 / 2012

Transaction ID : PR8740334089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

190.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. **SIDNEY P P PHILLIPS**

Mailing Address 1285 PLOVER CIR

City  
PONDER

State Zip Code  
TX 76259

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR,CLINICAL OPS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8740354089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. **ERIC M JOHNSON**

Mailing Address 8078 TRAIL LAKE DR

City  
POWELL

State Zip Code  
OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP,FINANCE (GENERAL)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8740404089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. **JILL F LANOQUETTE**

Mailing Address 19 OLD FARM ROAD

City  
GRANVILLE

State Zip Code  
OH 43023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, COMMUNICATION MG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8740414089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

152.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. **DONNA B MANN**

Mailing Address 6666 MCVEY BLVD

City State Zip Code  
 WEST WORTHINGTON OH 43235

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 DIR, HR MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.85

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8740424089

Amount of Each Receipt this Period

54.38

P/R Deduction (\$27.19 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. **KEVIN HARRY**

Mailing Address 3003 BREEZEWOOD LN

City State Zip Code  
 GALENA OH 43021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, FINANCE (GENERAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8740454089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. **LAUREN E E FIELDS**

Mailing Address 4316 OAK WOOD COURT

City State Zip Code  
 DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 DIR, KNOWLEDGE MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8740464089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

130.38

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 64 OF 115  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. MARC D DELORENZO**

Mailing Address 231 TILLER DRIVE

City	State	Zip Code
POWELL	OH	43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

Transaction ID : PR8740494089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. LINDA L GORDIEN**

Mailing Address 2135 TULARE CT

City	State	Zip Code
UPLAND	CA	91784

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT (STRAT A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

Transaction ID : PR8740514089

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. WILLIAM B B CHRISTIAN**

Mailing Address 3325 LITTLEPORT LANE

City	State	Zip Code
ACWORTH	GA	30101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT (STRAT A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

Transaction ID : PR8740534089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

192.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. ERIC T BOLLING**

Mailing Address 13162 THORNTON DRIVE

City State Zip Code  
 FRISCO TX 75035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, ACCOUNT (STRAT A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : PR8740544089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. MARY W BAXTER**

Mailing Address 9601 ST REGIS TERR

City State Zip Code  
 RICHMOND VA 23236

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, PHARM OPS & ACCO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : PR8740554089**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. KIMBERLY A Y A ROBINETTE**

Mailing Address 9409 AVEMORE CT.

City State Zip Code  
 DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 DIR, FINANCE (SS) MG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : PR8740574089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

152.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. PAUL T BUSTER**

Mailing Address 66 W BEECHWOLD BLVD

City	State	Zip Code
COLUMBUS	OH	43214

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, IT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

Transaction ID : PR8740594089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. CAMERON J J BRADY**Mailing Address 744 W. CORNELIA AVE.  
UNIT #1

City	State	Zip Code
CHICAGO	IL	60657

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, BUS INTEGRATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

Transaction ID : PR8740624089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. SCOTT WOLFF**

Mailing Address 3446 N CLAREMONT AVE

City	State	Zip Code
CHICAGO	IL	60618

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONAL EXC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

Transaction ID : PR8740654089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

114.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. BRIAN K SINGLETON**

Mailing Address 2521 EAST 31ST STREET

City

TULSA

State

OK

Zip Code

74105

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8740664089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. JOHN S LINDSEY**

Mailing Address 50 TIMBERKNOLL LOOP

City

POWELL

State

OH

Zip Code

43065

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, ENTERPRISE INFR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8740674089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. CRAIG C BARANSKI**

Mailing Address 12 MASSINA DR

City

WHEELING

State

WV

Zip Code

26003

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8740684089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

152.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. JAMES E BACH**

Mailing Address 26061 TWIN POND RD

City State Zip Code  
 LAKE BARRINGTON IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, INVENTORY MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

07 / 31 / 2012

Transaction ID : PR8740694089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. BRIAN R BUSS**

Mailing Address 7483 BARDSTON DRIVE

City State Zip Code  
 DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, APP DESIGN & DE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

07 / 31 / 2012

Transaction ID : PR8740704089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. ROBERT M M GABEL**

Mailing Address 1605 BERLIN STATION RD

City State Zip Code  
 DELAWARE OH 43015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, RISK MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

07 / 31 / 2012

Transaction ID : PR8740714089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

152.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 69 OF 115

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. HARRY BEDGOOD**

Mailing Address 105 LEE SMITH LANE

City  
KERNERSVILLE

State Zip Code  
NC 27284

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, OP EXCELLENCE D

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8740744089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. JEFFREY W W HENDERSON**

Mailing Address 347 MORGAN LN

City  
GAHANNA

State Zip Code  
OH 43230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
CHIEF FINANCIAL OFFI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8740754089**

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. JOHN J BYRNES**

Mailing Address 161 TUCKER DR

City  
WORTHINGTON

State Zip Code  
OH 43085

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, TAX TECHNICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8740764089**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

154.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. **ANDREW GRANT**

Mailing Address 35941 DARCY STREET

City

MURRIETA

State

CA

Zip Code

92562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, TERRITORY SALES

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8740774089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. **KENNETH H H ROBINETTE**

Mailing Address 9409 AVE MORE CT.

City

DUBLIN

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8740784089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. **JASON D MAXWELL**

Mailing Address 837 VALLEY ROAD

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ASC GEN CSL, LIT

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8740794089

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

154.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 71 OF 115

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. CRAIG E DAVIS**

Mailing Address 15340 GINA LYNN COURT

City	State	Zip Code
JACKSON	CA	95642

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

Transaction ID : PR8740804089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. TIMOTHY W W BOWER**

Mailing Address 1561 LITTLE FALLS DR

City	State	Zip Code
CENTERVILLE	OH	45458

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

Transaction ID : PR8740814089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. DONALD S S LUCHINI**

Mailing Address 212 LAKESIDE DRIVE

City	State	Zip Code
MCKEES ROCKS	PA	15136

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, FINANCE (GENERA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

Transaction ID : PR8740824089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

114.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. DENNIS W W BRAUN**

Mailing Address 5667 MEDALLION DR WEST

City

WESTERVILLE

State

OH

Zip Code

43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, FINANCE MEDICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8740834089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. JEFFREY E E GREER**

Mailing Address 1570 CAMBRIDGE BLVD

City

MARBLE CLIFF

State

OH

Zip Code

43212

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ENTERPRISE ARCHI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8740864089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. AMELIA D D MCCARTY**

Mailing Address 5864 LAKEVIEW DR

City

HILLIARD

State

OH

Zip Code

43026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

ASST GEN CSL, REGULA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8740874089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

114.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. BENNY SLEDGE**

Mailing Address 8016 W 138TH TERRACE

City State Zip Code  
 OVERLAND PARK KS 66223

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, ACCOUNT (STRAT A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8740894089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. JAMES W HILLMAN**

Mailing Address 141 WOODSTREAM DR

City State Zip Code  
 GRAND ISLAND NY 14072

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 VP, DIRECT SALES MGM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8740904089

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. COLLEEN GREINER**

Mailing Address 619 GUIDE ROAD

City State Zip Code  
 TABOR CITY NC 28463

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 EXEC, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8740914089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

174.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. KATHLEEN N HILLMAN**

Mailing Address 141 WOODSTREAM DR

City State Zip Code  
 GRAND ISLAND NY 14072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : PR8740924089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. GREGORY J J HALVACS**

Mailing Address 7402 OVERLAND TRAIL

City State Zip Code  
 DELAWARE OH 43015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, CORPORATE SECUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : PR8740944089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MICHAEL A A MONE**

Mailing Address 4909 SCENIC CREEK DR

City State Zip Code  
 POWELL OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, QRA MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : PR8740954089**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

152.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 75 OF 115

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL A A DUFFY**

Mailing Address 6825 MACNEIL DR

City

DUBLIN

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EVP, GLOBAL MFG &amp; SU

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	2		

**Transaction ID : PR8740964089**

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. STANLEY L L NAGEL**

Mailing Address 5771 OLDENBURGH WAY

City

DUBLIN

State

OH

Zip Code

43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, HR BUSINESS PART

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	2		

**Transaction ID : PR8740974089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MARTHA HUSTON**

Mailing Address 490 E. SUNBURST LN

City

TEMPE

State

AZ

Zip Code

85284

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP/GM, WEST REGION

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	1	2		

**Transaction ID : PR8741014089**

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

178.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. LISA MARLING-GEORGE**

Mailing Address 10502 MACKENZIE WAY

City State Zip Code  
 DUBLIN OH 43017

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, TALENT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8741024089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. DONALD C C GREENWOOD**

Mailing Address 14402 MARINA SAN PABLO PLACE  
# 1002

City State Zip Code  
 JACKSONVILLE FL 32224-0828

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT (STRAT A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8741034089

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. ANDREW T T ALDERMAN**

Mailing Address 1225 LEICESTER PL.

City State Zip Code  
 COLUMBUS OH 43235

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, STRATEGY &amp; BUS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8741054089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

164.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 77 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. SHELLEY A A BIRD**

Mailing Address 7998 CARAWAY AVE

City	State	Zip Code
DUBLIN	OH	43016

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EVP, PUBLIC AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

Transaction ID : PR8741064089

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. ROBERT S S THOMPSON**

Mailing Address 8338 AMBERLEIGH WAY

City	State	Zip Code
DUBLIN	OH	43017

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, OP EXCELLENCE DE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

Transaction ID : PR8741074089

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. ANDREW W W WEHR**

Mailing Address 905 LITTLE BEAR LOOP

City	State	Zip Code
LEWIS CENTER	OH	43035

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIRECTOR, EH&amp;S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

Transaction ID : PR8741084089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

288.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

A. RONALD BROWN

Mailing Address 7417 NEWALBANYLINKDR

City State Zip Code  
 NEW ALBANY OH 43054

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8741094089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ISMAEL VILLARREAL

Mailing Address 7302 EMERALD GLEN DR

City State Zip Code  
 SUGAR LAND TX 77479

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8741104089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DAVID R DION

Mailing Address 182 N FLORA PARKWAY

City State Zip Code  
 ADDISON IL 60101

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, QUALITY ASSURAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8741114089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

152.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. SCOTT CLAUUS**

Mailing Address 8413 LYLWOOD COURT

City State Zip Code  
**CHESTERFIELD VA 23838**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**CARDINAL HEALTH, INC**

Occupation  
**DIR, TRANSPORTATION**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**285.00**

Date of Receipt

**07 / 31 / 2012**

Transaction ID : **PR8741124089**

Amount of Each Receipt this Period

**38.00**

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. DAVID A GONZALES**

Mailing Address 384 COLORADO DRIVE

City State Zip Code  
**CEDAR CREEK TX 78612**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**CARDINAL HEALTH, INC**

Occupation  
**DIR , GOVERNMENT REL**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**750.00**

Date of Receipt

**07 / 31 / 2012**

Transaction ID : **PR8741134089**

Amount of Each Receipt this Period

**100.00**

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MAUREEN GIRARD**

Mailing Address 130 N GARLAND

City State Zip Code  
**CHICAGO IL 60602**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**CARDINAL HEALTH, INC**

Occupation  
**VP, MKTG & PRODUCT M**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**285.00**

Date of Receipt

**07 / 31 / 2012**

Transaction ID : **PR8741144089**

Amount of Each Receipt this Period

**38.00**

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

**176.00**

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 80 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. ELIZABETH M TH M KRENZER**

Mailing Address 343 MILFORD DR

City

DEERFIELD

State

IL

Zip Code

60015

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, MANUFACTURING

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2012

Transaction ID : PR8741154089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. JESSICA L L MAYER**

Mailing Address 4852 CARRIGAN RIDGE

City

DUBLIN

State

OH

Zip Code

43017

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, BUS MGMT (ATTY)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2012

Transaction ID : PR8741174089

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. DENTON F F HEWITT**

Mailing Address 1527 BERKSHIRE ROAD

City

UPPER ARLINGTON

State

OH

Zip Code

43221

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, COMPENSATION

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2012

Transaction ID : PR8741184089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

136.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. STUART G G LAWS**

Mailing Address 5635 CYPRESS COURT

City State Zip Code  
 WESTERVILLE OH 43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, CHIEF ACCOUNTIN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : PR8741204089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. BONNY FOWLER**

Mailing Address 214 CHERRY STREET

City State Zip Code  
 GRANVILLE OH 43023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, COMMUNICATION M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : PR8741234089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. ANNEMARIE IE LA BUE**

Mailing Address 1877 TEWKSBURY RD

City State Zip Code  
 UPPER ARLINGTON OH 43221

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ASC GEN CSL, LAB

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : PR8741244089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. CARL E HALL**

Mailing Address 626 W WRIGHTWOOD AVE #1E

City  
CHICAGO

State Zip Code  
IL 60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, MKTG & PRODUCT M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

**Transaction ID : PR8741254089**

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. STEPHEN A A KIEWIET**

Mailing Address 804 GLENCORSE DR

City  
SAINT PETERS

State Zip Code  
MO 63304

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

**Transaction ID : PR8741274089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. ALAN SMITH**

Mailing Address 6612 N. CREEKWOOD DR

City  
BRENTWOOD

State Zip Code  
TN 37027

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, QUALITY ASSURAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

**Transaction ID : PR8741284089**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

144.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 OF 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. RONALD T T FANNING**

Mailing Address 433 WILSHIRE BLVD

City  
LIBERTY

State Zip Code  
MO 64068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8741294089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. SANJEETH H PAI**

Mailing Address 367 CEDAR TRACE

City  
XENIA

State Zip Code  
OH 45385-9392

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, PHARM STRAT SOUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8741354089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. CHRISTINE L NE L BENTLEY**

Mailing Address 12283 SOUTH PARKER STREET

City  
OLATHE

State Zip Code  
KS 66061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, EXEC CNSLT, SCI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8741364089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. KEVIN L MARTIN**

Mailing Address 804 CATALINA COURT

City State Zip Code  
MACON MO 63552

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, MANUFACTURING M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

**Transaction ID : PR8741384089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. JOSEPH A A GOTTRON**

Mailing Address 874 AYLESBURY DRIVE

City State Zip Code  
GAHANNA OH 43230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, PHARMACEUTICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

**Transaction ID : PR8741394089**

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. JEFFREY A A CRIST**

Mailing Address 14177 PERFECT RD.

City State Zip Code  
SUNBURY OH 43074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, APP DESIGN & DE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

**Transaction ID : PR8741424089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

116.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN C RADEMACHER**

Mailing Address 5006 ROSALIND LANE

City  
POWELL

State Zip Code  
OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

PRESIDENT, NUCLEAR &

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8741484089**

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. SAMER ABDUL-SAMAD**

Mailing Address 6271 BELVEDERE GREEN BLVD

City  
DUBLIN

State Zip Code  
OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8741504089**

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. DIANNE RADIGAN**

Mailing Address 900 EASTCHESTER DR

City  
GAHANNA

State Zip Code  
OH 43230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, COMMUNITY RELAT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8741514089**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

306.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. SALLY CURLEY**

Mailing Address 9035 ESIN COURT

City  
POWELL

State Zip Code  
OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP, INVESTOR RELATI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

07 / 31 / 2012

Transaction ID : PR8741524089

Amount of Each Receipt this Period

150.00

P/R Deduction (\$75.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. GEORGE S S BARRETT**

Mailing Address 1038 MILL RD CIRCLE

City  
RYDAL

State Zip Code  
PA 19046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
CHAIRMAN/CEO, CARDIN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2884.50

Date of Receipt

07 / 31 / 2012

Transaction ID : PR8741534089

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MARK PILKINGTON**

Mailing Address 4367 HICKORY ROCK DR

City  
POWELL

State Zip Code  
OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, STRATEGY MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

07 / 31 / 2012

Transaction ID : PR8741584089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

610.60

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. CRAIG MORFORD**

Mailing Address 5565 LAKE SHORE AVE,

City  
WESTERVILLE

State Zip Code  
OH 43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
CHIEF COMPLIANCE/LEG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2884.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR8741594089

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. BRIAN E DILBONE**

Mailing Address 368 ROCKY SPRINGS

City  
BLACKLICK

State Zip Code  
OH 43004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, APPDSGN/DEV SAP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR8741604089

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. TOHID A VAHEDIAN**

Mailing Address 1857 COLLINGSWOOD RD

City  
COLUMBUS

State Zip Code  
OH 43221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP, GM MED SVCS & S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR8741634089

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

474.60

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL J J MANGIONE**

Mailing Address 10733 JONES ROAD

City  
CLARENCE

State Zip Code  
NY 14031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8741644089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. ERIC J PERLA**

Mailing Address 15426 COURT AMBER TL

City  
CYPRESS

State Zip Code  
TX 77433

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, TERRITORY SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8741654089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. JOEL M BARCZAK**

Mailing Address 1570 COUNTRY WALK DR

City  
FLEMING ISLAND

State Zip Code  
FL 32003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, DIRECT SALES MGM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8741674089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

152.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. PETER J BURKE**

Mailing Address 4220 ABBEY CHASE COURT

City State Zip Code  
 HILLIARD OH 43026

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, SALES OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8741684089

Amount of Each Receipt this Period

19.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **B. WALTER WEIDEMANN**

Mailing Address 7 KIRKCALDY DR

City State Zip Code  
 WEST CHESTER PA 19382

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, SALES TRAINING/

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8741704089

Amount of Each Receipt this Period

19.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

## **C. SEAN P WATERS**

Mailing Address 2621 EAST ARABIAN DRIVE

City State Zip Code  
 GILBERT AZ 85296

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, CHEM/PHARMA OPS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8741714089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

76.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. HENRY M CHILTON**

Mailing Address 32 PALISADES PARKWAY

City

OAK RIDGE

State

TN

Zip Code

37830

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8741724089**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. WILLIAM S S CLAUNCH**

Mailing Address 10744 CAMPDEN LAKES BLVD

City

DUBLIN

State

OH

Zip Code

43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, STRATEGY MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8741734089**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. LUKE C AUGUSTINE**

Mailing Address 10834 S 166TH ST

City

OMAHA

State

NE

Zip Code

68136

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8741744089**

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

252.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. KATHERINE A NE A BENSON**

Mailing Address 3410 NOBB HILL DR

City

HUDSONVILLE

State

MI

Zip Code

49426

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, NUCLEAR PHARMAC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8741754089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. DANIEL F F MURPHY**

Mailing Address 30 WILLOWBROOK RD

City

WEST HARTFORD

State

CT

Zip Code

06107-1638

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, NUCLEAR PHARMAC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8741764089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. BENSON P P YANG**

Mailing Address 137 LAKESIDE DRIVE

City

CORTE MADERA

State

CA

Zip Code

94925

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, MULTI-FUNCTION M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8741774089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

152.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. CARROLL B B CALLICOTT**

Mailing Address 3139 SUMMERLIN DRIVE

City

BELDEN

State

MS

Zip Code

38826

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

MGR, NUCLEAR PHARMAC

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

285.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2012

Transaction ID : PR8741784089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. JOSEPH E E LUKACS**

Mailing Address 18 VILLAGE GROVE RD

City

LITTLE ROCK

State

AR

Zip Code

72211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, NUCLEAR PHARMAC

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

285.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2012

Transaction ID : PR8741814089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. JACK L COFFEY**

Mailing Address 200 BAY SHORE DRIVE

City

ROCKWOOD

State

TN

Zip Code

37854

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, QRA

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2012

Transaction ID : PR8741824089

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

176.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. DAO V PHO**

Mailing Address 5827 STONECREST DR.

City State Zip Code  
 AGOURA HILLS CA 91301

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8741834089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. JAMES FRIES**

Mailing Address 138 NEW CUT ROAD

City State Zip Code  
 WINDER GA 30680

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, DIRECT SALES MG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8741844089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MARC B MULLEN**

Mailing Address 1650 SHERBORNE LANE

City State Zip Code  
 POWELL OH 43065

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, GM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8741854089

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

176.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. IHSIEN S S LIN**

Mailing Address 7664 MILL SPRINGS DRIVE

City State Zip Code  
DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, STRATEGIC PRICI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8741864089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. WAYNE J BOUDREAU**

Mailing Address 405 PETREL TRAIL

City State Zip Code  
BRADENTON FL 34212

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, NUCLEAR PHARMAC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8741884089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. CRAIG ROTHMAN**

Mailing Address 42 SEMINOLE WAY

City State Zip Code  
SHORT HILLS NJ 07078

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ACCOUNT (HEALTH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8741894089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. THOMAS J J RAFFERTY**

Mailing Address 38 HERITAGE COURT

City  
DELMONT

State Zip Code  
PA 15626

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, STRATEGIC SOURCI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8741904089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. MICHAEL A A MARUSA**

Mailing Address 38 ALPINE CIRCLE

City  
SANDY HOOK

State Zip Code  
CT 06482

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
VP, ACCOUNT (HEALTH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8741914089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. ANITA ANDERSON**

Mailing Address 27341 DAKOTA AVE.

City  
ELKO

State Zip Code  
MN 55020

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
EXEC, ACCOUNT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

Transaction ID : PR8741944089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. CATHY CHENETSKI**

Mailing Address 5734 ENNISHANNON PLACE

City State Zip Code  
DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, REGULATORY MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

**Transaction ID : PR8741964089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. AKEEM C IMANJONES**

Mailing Address 4955 FANCY-FREE LANE

City State Zip Code  
COLUMBUS OH 43231

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, HR BUSINESS PAR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

**Transaction ID : PR8741974089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. ALFREDO S S RUSSO**

Mailing Address 2490 ALUM CROSSING DRIVE

City State Zip Code  
LEWIS CENTER OH 43035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, REGULATORY MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

**Transaction ID : PR8742014089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00



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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. DAVID K ORENSTEN**

Mailing Address 3641 DAYSPRING DRIVE

City State Zip Code  
 HILLIARD OH 43026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

ASST GEN CSL, LITIGA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8742024089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. RICHARD W W WATSON**

Mailing Address PO BOX 991

City State Zip Code  
 SUMNER WA 98390

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8742034089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. ROGELIO A A ARMINO**

Mailing Address 6213 BLUFF TRAIL LN

City State Zip Code  
 EL PASO TX 79912

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONAL EXC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8742044089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.00

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. ELEANOR M M DAUFENBACH**

Mailing Address 2029 W. LANE AVENUE

City State Zip Code  
COLUMBUS OH 43221

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, CLINICAL OPS MG

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR8742054089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. PATRICIA A MORRISON**

Mailing Address 55 EAST ERIE  
#3801

City State Zip Code  
CHICAGO IL 60611

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EVP, CIO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR8742064089

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MARK BLAKE**

Mailing Address 5418 PICAYUNE STREET

City State Zip Code  
COLUMBUS OH 43221

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EVP, STRATEGY &amp; CORP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2884.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR8742094089

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

522.60

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. URSULA L L MCNEILL**

Mailing Address 376 ROBERTS RUN COVE

City State Zip Code  
 SUWANEE GA 30024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, HR BUSINESS PAR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : PR8742104089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. DIANE CREAL**

Mailing Address 2928 BIRCH ROAD

City State Zip Code  
 HOMEWOOD IL 60430

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, PHARMACY OPERAT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : PR8742114089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. GILBERTO O QUINTERO**

Mailing Address 6650 BRODIE BLVD

City State Zip Code  
 DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, QRA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : PR8742124089**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

152.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. JAMES BROWN**

Mailing Address 923 TIMBER LANE

City  
LAKE FOREST

State Zip Code  
IL 60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, CONCEPTUAL PROD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8742144089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. COLIN HATCH**

Mailing Address 1351 NOE BIXBY ROAD

City  
COLUMBUS

State Zip Code  
OH 43232

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, TAX TECHNICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8742154089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. LANE CHERAMIE**

Mailing Address 152 WEST 117TH STREET

City  
CUT OFF

State Zip Code  
LA 70345

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, HEALTH SYSTEM P

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8742164089**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

152.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. DOUGLAS HELMREICH**

Mailing Address 6600 DEESIDE DR.

City

DUBLIN

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, MARKETING RESEA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

07 / 31 / 2012

Transaction ID : PR8742174089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. JEFFREY SCOTT**

Mailing Address 300 W. SPRING STREET  
#1502

City

COLUMBUS

State

OH

Zip Code

43215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, GM P4 HEALTHCAR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1504.50

Date of Receipt

07 / 31 / 2012

Transaction ID : PR8742194089

Amount of Each Receipt this Period

200.60

P/R Deduction (\$100.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. ROBERT WELLS**

Mailing Address 301 BRIDLE PATH LANE

City

ANNAPOLIS

State

MD

Zip Code

21403

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, ASC GEN CSL, COM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

07 / 31 / 2012

Transaction ID : PR8742204089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

314.60

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. MARK S JONES**

Mailing Address 1106 PORTSMOUTH CIRCLE

City State Zip Code  
GURNEE IL 60031

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, MKTG &amp; PRODUCT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR8742214089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. ROBERT J J DOONE**

Mailing Address 6119 PEPPERGRASS COURT

City State Zip Code  
WESTERVILLE OH 43082

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, MARKETING MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR8742224089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. JEFFREY P P LEDBETTER**

Mailing Address 6700 RIDPATH ROAD

City State Zip Code  
GROVE CITY OH 43123

FEC ID number of contributing federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

MGR, ACCOUNT MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR8742234089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

114.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. MICHELLE M E M RETHMAN**

Mailing Address 6417 BROMFIELD TRACE

City State Zip Code  
 CENTREVILLE VA 20120

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

EXEC, TERRITORY SALE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

07 / 31 / 2012

Transaction ID : PR8742244089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. CATHERINE S NE S KENWORTHY**

Mailing Address 5000 SLATE RUN WOODS COURT

City State Zip Code  
 COLUMBUS OH 43220

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, CUSTOMER SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

07 / 31 / 2012

Transaction ID : PR8742254089

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. KAUSHIK GHOSH**

Mailing Address 7691 FINBARR COURT

City State Zip Code  
 DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, MKTG & PRODUCT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

07 / 31 / 2012

Transaction ID : PR8742274089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

276.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. MEGHAN FITZGERALD**

Mailing Address 6 MORGAN

City  
NORWALK

State Zip Code  
CT 06851

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
PRES, SPECIALTY SOLU

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8742284089**

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. MARSHA L L ARAGON**

Mailing Address 29306 DAKOTA DR

City  
VALENCIA

State Zip Code  
CA 91354

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8742294089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. DANIEL MOVENS**

Mailing Address 987 RETREAT LANE

City  
POWELL

State Zip Code  
OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARDINAL HEALTH, INC

Occupation  
SVP/GM, PARMED PHARM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

**Transaction ID : PR8742314089**

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

238.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. WILLIAM RENFER**

Mailing Address 3328 E PINTAIL WAY

City	State	Zip Code
ELK GROVE	CA	95757

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, OPERATIONS MGMT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

**Transaction ID : PR8742324089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. STEPHEN J J MEDVE**

Mailing Address 271 E WHITTIER ST.

City	State	Zip Code
COLUMBUS	OH	43206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SR RECRUITER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

**Transaction ID : PR8742334089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MATTHEW G G BAKER**

Mailing Address 13602 ASHLEY RUN

City	State	Zip Code
HOUSTON	TX	77077

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2012

**Transaction ID : PR8742354089**

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

152.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. RICHARD MONTGOMERY**

Mailing Address 2717 QUEEN ELAINE DRIVE

City State Zip Code  
LEWISVILLE TX 75056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, TECHNICAL SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

**Transaction ID : PR8742374089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. GAUTAM S S SHIRHATTIKAR**

Mailing Address 5473A BRIARDALE LANE

City State Zip Code  
DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, STRATEGIC PLNG/E

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

**Transaction ID : PR8742384089**

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. RAMON GREGORY**

Mailing Address 9003 MEDITERRA PLACE

City State Zip Code  
DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, CUSTOMER SERVIC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

**Transaction ID : PR8742394089**

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

126.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. NICHOLAS S AUGUSTINOS**

Mailing Address 2416 15TH STREET

City State Zip Code  
 SAN FRANCISCO CA 94114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, HEALTH INFO &amp; S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR8742414089

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. ROBERT A A HONNER**

Mailing Address 7167 SPRINGVIEW LN

City State Zip Code  
 DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

DIR, FIN PLNG &amp; ANAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR9340914089

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. SHAUN F YOUNG**

Mailing Address 8415 SUMMERHOUSE DR W

City State Zip Code  
 DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, MKTG &amp; PRODUCT M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2012

Transaction ID : PR9340944089

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

338.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. KELLY B WILSON**

Mailing Address 4556 SATTERTON CIRCLE

City State Zip Code  
DUBLIN OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, HR BUSINESS PART

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR9368924089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. WILLIAM C C BODINGER**

Mailing Address 24 BONWIT ROAD

City State Zip Code  
RYE BROOK NY 10573

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

SVP, GM KINRAY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR9368964089

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. MICHELLE E GILE**

Mailing Address 1 HANSON PLACE APT 12L

City State Zip Code  
BROOKLYN NY 11243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARDINAL HEALTH, INC

Occupation

VP, DIRECT SALES MGM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2012

Transaction ID : PR9368974089

Amount of Each Receipt this Period

76.00

P/R Deduction (\$38.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

252.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. DEBBIE J J MITCHELL**

Mailing Address 9 ALBAN MEWS

City State Zip Code  
 NEW ALBANY OH 43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 SVP, PUBLIC RELATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : PR9408994089**

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**B. ROBERT KULIS**

Mailing Address 6150 NORTH BAY RIDGE AVENUE

City State Zip Code  
 WHITEFISH BAY WI 53217

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 SVP, GM PHARMACY SOL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : PR9409024089**

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

**C. DONALD M CASEY**

Mailing Address 7708 TILLINGHAST DRIVE

City State Zip Code  
 DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CARDINAL HEALTH, INC

Occupation  
 CEO, MEDICAL SEGMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 31 2012

**Transaction ID : PR9413434089**

Amount of Each Receipt this Period

384.60

P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

584.60

20590.36

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

## **A. Comerica Bank**

Mailing Address P.O. Box 75000  
MC 2250

City State Zip Code  
Detroit MI 48275-2250

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.57

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 01 2012

**Transaction ID : 6538090**

Amount of Each Receipt this Period

36.47

June Interest

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

36.47

36.47

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Mary Bono Mack Committee**

Mailing Address 1201 New York Ave NW

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

Purpose of Disbursement  
Direct Contribution

011

Candidate Name

**Rep. Mary Bono**Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 45

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2012

**Transaction ID : 6531494**

Amount of Each Disbursement this Period

2000.00
---------

Direct Contribution

Full Name (Last, First, Middle Initial)

**B. Dave Camp for Congress**

Mailing Address 139 Ashman #560

City Midland	State MI	Zip Code 48640
-----------------	-------------	-------------------

Purpose of Disbursement  
Direct Contribution

011

Candidate Name

**Rep. David Lee Camp**Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MI District: 04

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		13		2012

**Transaction ID : 6566642**

Amount of Each Disbursement this Period

2000.00
---------

Direct Contribution

Full Name (Last, First, Middle Initial)

**C. Upton for All of Us**

Mailing Address 104 Hume Avenue

City Alexander	State VA	Zip Code 22301
-------------------	-------------	-------------------

Purpose of Disbursement  
Direct Contribution

011

Candidate Name

**Rep. Frederick Stephen Upton**Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MI District: 06

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		13		2012

**Transaction ID : 6566652**

Amount of Each Disbursement this Period

2500.00
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Direct Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6500.00

	21b		22	<b>X</b>	23		24		25		26
	27		28a		28b		28c		29		30b

Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC

Void - Mary Bono Mack Committee

### Direct Contribution

### Direct Contribution



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 113 OF 115

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Jim Jordan for Congress**

Mailing Address 1709 State Route 560 South

City	State	Zip Code
Urbana	OH	43078

Purpose of Disbursement  
Direct Contribution

011

Candidate Name

**Rep. Jim Jordan**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2012

**Transaction ID : 6591526**

Amount of Each Disbursement this Period

5000.00
---------

Direct Contribution

Full Name (Last, First, Middle Initial)

**B. Manchin For West Virginia**

Mailing Address PO Box 5202

City	State	Zip Code
Charleston	WV	25361

Purpose of Disbursement  
Direct Contribution

011

Candidate Name

**Sen. Joe Manchin III**Category/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WV District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2012

**Transaction ID : 6591527**

Amount of Each Disbursement this Period

2500.00
---------

Direct Contribution

Full Name (Last, First, Middle Initial)

**C. Renacci For Congress**

Mailing Address 217 Third Street SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Direct Contribution

011

Candidate Name

**Rep. James Renacci**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2012

**Transaction ID : 6594787**

Amount of Each Disbursement this Period

1000.00
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Direct Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Mike Thompson for Congress**

Mailing Address 5429 Madison Avenue

City	State	Zip Code
Sacramento	CA	95841

Purpose of Disbursement  
Direct Contribution

011

Candidate Name

**Rep. Mike Thompson**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State: CA	District: 05

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2012

**Transaction ID : 6595240**

Amount of Each Disbursement this Period

2000.00
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Direct Contribution

Full Name (Last, First, Middle Initial)

**B. America Works PAC**

Mailing Address 426 C Street NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement  
Direct Contribution

011

Candidate Name

**America Works PAC**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2012

**Transaction ID : 6595241**

Amount of Each Disbursement this Period

5000.00
---------

Direct Contribution

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7000.00

23000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cardinal Health Inc. PAC A/K/A Cardinal Health Companies PAC**

Full Name (Last, First, Middle Initial)

**A. Kevin L. Boyce Committee**

Mailing Address 1480 Dublin Rd

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Kevin Boyce, STATE HOUSE 27th OH

Candidate Name

**OH Rep. Kevin Boyce**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 27

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2012

**Transaction ID : 6591794**

Amount of Each Disbursement this Period

500.00
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Kevin Boyce, STATE HOUSE 27th OH

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

500.00
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500.00
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